

# **Greater Manchester**

## **Cancer Alliance**

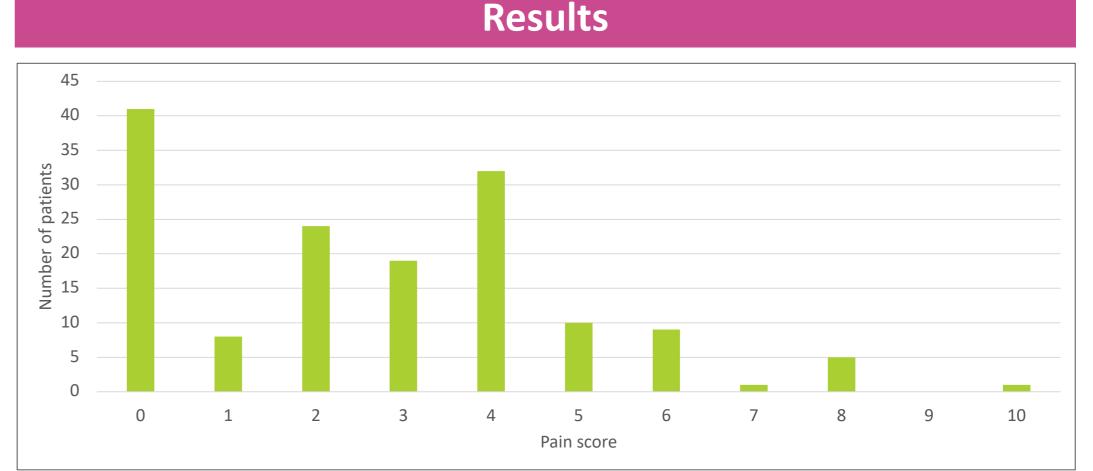
# **PROMs in Transurethral Laser Ablation (TULA) of Bladder Lesions**

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#### **Introduction & Objectives**

As part of the "Getting It Right First Time" (GIRFT) programme, one of the key quality actions highlighted to improve bladder cancer management is the potential to develop enhanced outpatient flexible cystoscopy-based treatments, such as transurethral laser ablation (TULA) (BAUS 2022). TULA is a minimally-invasive, outpatient-based procedure that involves using a laser, via a cystoscope, to ablate abnormal bladder lesions, including bladder cancers. This is performed using local anaesthetic. Classic indications include ablation of low grade G1/2pTa tumours, tumours <1cm, superficial recurrences or for symptom control in more advanced disease, however more novel indications continue to emerge. There are eight lasers currently in use throughout the North West region.



**Figure 1.** 83% of patients reported a pain score below moderate (0-4), with 27% reporting the procedure as painless (0). The average pain score was 2.7.

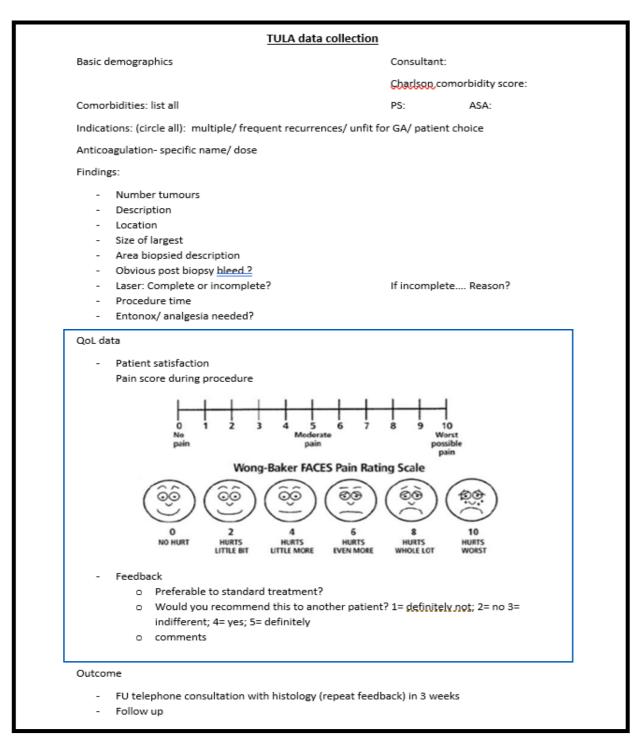
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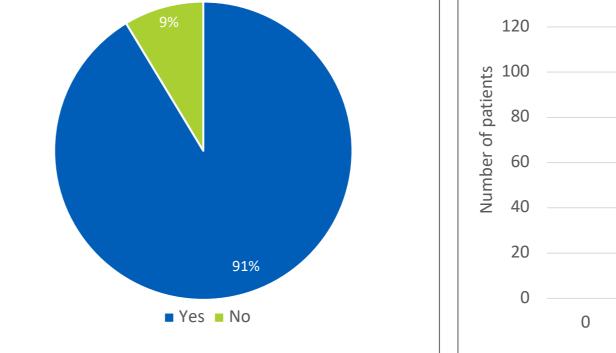
The main objective of this multi-centre audit is to evaluate patient-reported outcome measures following TULA of bladder lesions.

#### Methods

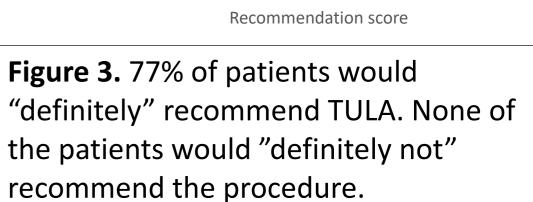
Data was collected retrospectively from April 2022 to April 2023, across 6 centres in the Greater Manchester region (Salford, MRI, Wythenshawe, WWL, Bolton, Tameside). A total of 233 TULA procedures were performed within this timeframe, on 187 patients. 46 were repeat procedures.

Post-procedure interviews were conducted with 150 patients, utilising the proforma below:





**Figure 2.** In 91% of patients TULA was preferable to standard treatment.



#### **Summary**

Outpatient-based flexible cystoscopy treatment of bladder lesions (e.g. TULA) has many advantages. There is potential to treat a greater number of patients, as well as reduce recovery times compared to the current standard treatment (cystodiathermy), which in turn alleviates operating theatre pressures. Notably, this procedure eliminates the need for general or spinal anaesthesia, further reducing potential risks to patients, as well as reducing the NHS carbon footprint, promoting environmental sustainability (NHS England 2022).

Demonstrating adequate patient-reported outcomes is a vital aspect of any novel treatment or service; the results of this

1. Pain score: 0 = no pain to 10 = severe pain

2. Is it preferable to standard treatment (cystodiathermy)?

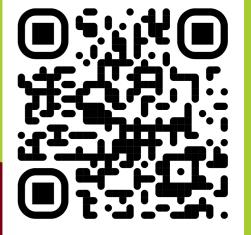
3. Recommendation score: 1 = definitely would not recommend to 5 = definitely TULA verse would recommend

### Key Messages

- Transurethral laser ablation (TULA) is a minimally-invasive, well-tolerated outpatient procedure with a high patient satisfaction rate.
- Demonstrating patient satisfaction of this procedure could pave the way for expanded utilisation in the future, particularly in the management of bladder cancer.
- Aligning interventions with patients' quality of life and environmental sustainability is vital to improving patient satisfaction and
  overall outcomes for both patients and the healthcare service.

audit demonstrate that TULA provides excellent patient satisfaction and is generally well-tolerated. This offers a good foundation to consider expanding this service.

Future research efforts will focus on gathering additional data from multiple centres, exploring ways to further improve patient satisfaction, and investigating the clinical efficacy of TULA versus TURBT.



**References & Contributors**